

application form



AM support services

Position applied for _____

How did you hear of us _____

AM support services Ltd
39 Abbots Way
Lune Industrial Estate
Lancaster
LA1 5QP

Please answer all of the questions below using BLOCK CAPITALS
If any answer is not applicable then insert 'No' or 'N/A'

personal details

Mr/Mrs/Miss/Ms	First Name(s)	
Last Name	Former Name(s)	
Address		
Post Code		
Tel : Home	Work	Mobile
If less than 2 years state your previous address		

Date of Birth	Place of Birth	Nationality
If not born in the EEU state date and place of entry		
Work Permit/Visa	Expiry Date	NI No.
Emergency Contact Name and Address		
Tel : Home	Work	Mobile

do you...

Own a car?	<input type="radio"/> Yes	<input type="radio"/> No	
Have a current driving licence?	<input type="radio"/> Provisional	<input type="radio"/> Full	<input type="radio"/> No
Have any current endorsements?	<input type="radio"/> Yes (Give details below)	<input type="radio"/> No	
Have you ever been cautioned/convicted of a criminal offence (Subject to the Rehabilitation of Offenders Act*) If Yes please give details	<input type="radio"/> Yes	<input type="radio"/> No	
Are you the subject of any current court proceedings, police or any other enquiries If Yes please give details	<input type="radio"/> Yes	<input type="radio"/> No	
Are you/have you been the subject of bankruptcy proceedings or court judgements for dept? If Yes please give details	<input type="radio"/> Yes	<input type="radio"/> No	
Have you ever been refused a licence to work in the security industry If Yes please give details	<input type="radio"/> Yes	<input type="radio"/> No	

*NB: Disclosure is not required where there is a conviction to which the provisions of the Rehabilitation of Offenders Action, 1974 apply. Failure to disclose an unspent conviction is, in itself, a criminal offence. If you are unclear about any of these questions ask the interviewing Officer.

education & training

Dates (Month & Year)		Establishment Address & Telephone Number	Examination Passed/ Professional Qualifications/Training
From	To		

outside work interests

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employment record



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Please show all periods of employment and unemployment, full or part time, to cover the last 10 years including periods of self employment and full and part time education. Start with the most recent.

Dates		Name and Address of Employer and Contact Details	Job Title	Reason for Leaving
From	To			
1.		Tel No:	Pay Rate/ Annual Salary	
2.		Tel No:	Pay Rate/ Annual Salary	
3.		Tel No:	Pay Rate/ Annual Salary	
4.		Tel No:	Pay Rate/ Annual Salary	
5.		Tel No:	Pay Rate/ Annual Salary	
6.		Tel No:	Pay Rate/ Annual Salary	
7.		Tel No:	Pay Rate/ Annual Salary	

service record

Royal Navy/Army/RAF/Police/Fire Service/Merchant Navy (delete as applicable)

Dates		Conduct record
From	To	

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screening record



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For office use only

Referees Reference Confirmed by Name, Position, Date, Tel No.	Dates of Employment Confirmed		Reason for Leaving	Would You Re-employ If Not, Why?	Should We Employ in a Position of Trust	References Obtained by Name/ Position/ Date	Written Reference Sent/Received Date	Checked by Name/ Position/ Date
	From	To						
1. Fax No:							Sent: Received:	
2. Fax No:							Sent: Received:	
3. Fax No:							Sent: Received:	
4. Fax No:							Sent: Received:	
5. Fax No:							Sent: Received:	
6. Fax No:							Sent: Received:	
7. Fax No:							Sent: Received:	

1	J	F	M	A	M	J	J	A	S	O	N	D
2	J	F	M	A	M	J	J	A	S	O	N	D
3	J	F	M	A	M	J	J	A	S	O	N	D
4	J	F	M	A	M	J	J	A	S	O	N	D
5	J	F	M	A	M	J	J	A	S	O	N	D
6	J	F	M	A	M	J	J	A	S	O	N	D
7	J	F	M	A	M	J	J	A	S	O	N	D
8	J	F	M	A	M	J	J	A	S	O	N	D
9	J	F	M	A	M	J	J	A	S	O	N	D
10	J	F	M	A	M	J	J	A	S	O	N	D
11	J	F	M	A	M	J	J	A	S	O	N	D

5 Year Screening Completed Employment Authorised		
DIRECTOR		
DATE	/	/

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references & declaration



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personal references

Please give details of two persons, not related to you, who have known you for at least 2 years within the last five years and who may be approached for character references.

Name
Address
Occupation
Tel no.
Period known (Years)

Name
Address
Occupation
Tel no.
Period known (Years)

business & trade references

If you have shown periods of self-employment, give names of two professional referees who can confirm these eg. Solicitor, Accountant etc

Name
Address
Occupation
Tel no.
Period known (Years)

Name
Address
Occupation
Tel no.
Period known (Years)

declaration

The information that you provide on this form and that obtained from other sources will be used by AM Support Services Ltd to process your application for employment. The personal information that you have provided will be treated confidentially to aid in the monitoring of the recruitment process.

If your application is successful, the information that you have given will also be used in the administration of your employment. We may also use the information if there is a complaint or legal challenge relevant to the recruitment process.

We may check the information collected with third parties or with other information that we hold. We may also pass on information to certain third parties to prevent or detect crime or in other ways permitted by law.

By signing the application, it will be assumed by AM Support Services Ltd that you agree to the processing of sensitive personnel data in accordance with AM Support Services Ltd registration with the Data Protection Commissioner.

I confirm that the information given on this form is, to the best of my knowledge, true and complete. Any false statements may be sufficient cause for rejection or, if employed, dismissal.

I understand that my employment is subject to satisfactory vetting and (where relevant) obtaining and retaining a license to operate as a private security officer according to the Private Security Act 2001. I hereby authorise AM Support Services Ltd to obtain references to support this application once an offer has been made and release the company and references from any liability caused by giving and receiving information.

May we approach your present employer now?

Yes No

I also agree that, at any time, if requested to do so, I will undergo a medical examination and consent to the results of and such examination being revealed to the Company. I agree, if requested by the Company, to make a Special Access Enquiry under the Data Protection Act and sign a Statutory Declaration to confirm the dates of previous employment.

Signed _____

Dated _____

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INTERVIEWERS NOTES	
Appearance	
Communication Skills	
Literacy (test result)	
Attitude	
Areas prepared to work	
Notice required	
Holidays booked	

SECURITY INDUSTRY AUTHORITY LICENCE DETAILS (As shown on licence)	
Name	
Number	
Expiry Date	
(Please attach photocopy of original)	

Interviewer _____

Date _____

DOCUMENT CHECK	ORIGINAL SEEN	PHOTOCOPY ATTACHED
Birth Certificate		
Passport		
Driving Licence		
Work Permit (OWI)/expiry date		
Authority from College		
Service Record Book		
Health Questionnaire		
WTA Letter		

TESTED	RESULT	TEST DATE	INITIALS
Vision			
Colour Perception			
Hearing			
Smell			

UNIFORM SIZES			
Collar		Hat	
Waist		Shoe Size	
Chest		Blouse	
Leg (29/31/33)		Skirt	

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